

SUPER HEALTH INSURANCE



“Comprehensive
health insurance aur
unmatched **protection** dono

Super Health Insurance

SBI General Insurance brings you an Umbrella Protection, a first-of-its-kind product that offers an all-inclusive health insurance product to cater to all your needs.

The SBI General Super Health Insurance, a comprehensive product for ultimate protection.

Who Can Buy This Policy?

- This Policy can be taken on Individual or Family floater basis as per the below family definitions:

Individual: Self, legally married spouse, son, son-in-law, daughter, daughter-in-law, father, mother, brother, brother-in-law, sister, sister-in-law, mother-in-law, father-in law, grandmother, grandfather, grandson, granddaughter, uncle, aunt, nephew, niece, or any other relationship having an insurable interest.

Family Floater: Self, legally married spouse, dependent children (natural/legally adopted), Parents and/or Parents-in-law.

- Entry age for adults is 18 years & for dependent children 91 days to 30 years.
- Super Health Insurance has no restriction on the maximum limit for the entry age for proposer and his/her family members.

What Are The Key Benefits Of The Policy?



27 Base Covers &
7 Optional Covers



Sum Insured from
₹3 Lacs to ₹2 Crores



RelInsure Benefit



Health Multiplier



Claims Shield



Annual Health Check-up



Medical Treatment Abroad

Claims Shield Protection

What Are the Different Benefit Covers ?



Health Multiplier Benefit

When diagnosed with a Serious Illness, no need to worry about the inflated hospital bills, Health Multiplier will multiply your Coverage up to 3 times at no additional cost. (Health Multiplier is applicable only for the listed 37 Serious Illnesses.)



ReInsure Benefit

Unlimited Reinstate of Sum Insured at no extra premium for additional protection, which becomes payable from the first claim itself, for each and every claim in a policy year.



Claims Shield

Covers the payment of consumables like gloves, masks, cotton, bandages and so on to minimise your out of pocket expenses.



Comprehensive Hospitalisation Coverage

What Does The Policy Cover?



HOSPITALISATION COVERS

- ▶ Covers Medically Necessary Treatment of an Insured Person due to Illness or Injury sustained or contracted during the Policy Period subject to availability of Sum Insured.



Inpatient Hospitalisation

- ▶ Room rent and boarding expenses as specified in policy schedule.
- ▶ Intensive Care Unit Expenses/Intensive Cardiac Care Unit (ICCU) expenses as specified in policy schedule.
- ▶ Nursing Expenses as provided by the Hospital
- ▶ Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.
- ▶ Anaesthesia, blood, oxygen, operation theatre charges, surgical appliances.
- ▶ Consultation fees including Telemedicine by Medical Practitioner.
- ▶ Medicines, drugs, and consumables.
- ▶ Diagnostic procedures.
- ▶ The Cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure.



Shared Accommodation Cash Benefit

- ▶ Daily Cash Amount of ₹ 500/ ₹ 1,000 per day, with benefit as per plan opted, if hospitalised in a shared accommodation in a Network Provider Hospital and the Hospitalisation exceeds 48 hours.

Health Multiplier For Serious Illnesses



Health Multiplier (Listed 37 Serious Illnesses)

- ▶ If you are diagnosed and hospitalised for the listed 37 serious illnesses, then the Base Sum Insured will increase by a multiplier as per the opted Plan.



Pre-hospitalisation Medical Expenses

- ▶ Pre-Hospitalisation Medical Expenses for a duration of 60 days immediately prior to the date of Hospitalisation.



Post-hospitalisation Medical Expenses

- ▶ Post-Hospitalisation Medical Expenses for a duration of up to maximum of 180 days from the date of discharge, as per plan opted.



Day Care Treatment

- ▶ Medical Expenses incurred under any Day Care Treatment during the Policy Period following an Illness or Injury, up to the Base Sum Insured.



Domiciliary Hospitalisation

- ▶ Medical Expenses incurred for Domiciliary Hospitalisation during the Policy Period following an Illness or Injury, actuals up to Base Sum Insured and are indemnified on Reimbursement Basis only.



Home Health Care

- ▶ Medical Expenses incurred on availing treatment at Home during the Policy Year for actuals, up to the Base Sum Insured, if prescribed in writing by the treating Medical Practitioner.

ReInsure Benefit



ReInsure Benefit (Related and Unrelated Illness Both)

- Refill up to maximum of 200% of Base Sum Insured, as per the plan opted, unlimited times in a policy year. This benefit is triggered and becomes payable for each and every claim from the first claim itself in a policy year.



Emergency Road Ambulance Cover

- Cover for expenses incurred from ₹ 3,000 up to the limit of Base Sum Insured, as per the plan opted, per hospitalisation, on Road Ambulance Services.



Air Ambulance Cover (Domestic)

- Expenses incurred, up to maximum of ₹10 lacs, as per plan opted, during the Policy Year, towards Ambulance transportation in an airplane or helicopter for Emergency Care.



Organ Donor Expenses

- Medical expenses up to Base Sum Insured , towards organ donor's Hospitalisation for harvesting of the donated organ where an Insured Person is the recipient.



Medical Treatment abroad

- Medical Expenses incurred towards the Insured Person's Inpatient Care outside India during the Policy Period caused solely and directly due to the 16 listed Illness/ procedures which are diagnosed in India.

Modern Treatment/ Advanced Procedures



Bariatric Surgery Cover

- ▶ Coverage for medical expenses, in case of hospitalisation on the advice of a Medical Practitioner, because of conditions which require Bariatric Surgery. Coverage up to 2 Lacs



Recovery Benefit

- ▶ In case of hospitalisation exceeding 5 consecutive days, this cover will pay a lump sum amount, maximum of ₹10,000 as per the plan opted. This benefit is over and above the Base Sum Insured.



Modern Treatments/Advanced Procedures

- ▶ Medical expenses incurred by the Insured Person for Procedures/Treatments enlisted in the Policy Schedule either as Inpatient Care treatment or as a part of Day Care treatment will be covered up to the Sum Insured.



Enhanced Cumulative Bonus

- ▶ Enhanced Cumulative Bonus (ECB) will be applied by 50% of the Base Sum Insured of immediate preceding Policy Year in respect of each claim free Policy Year.



Loyalty Credit (Sum Insured enhancement irrespective of claim)

- ▶ If the Insured Person's cover under the Policy is renewed without a break, we will increase the Base Sum Insured (only for Platinum Infinite Plan) applicable under the Policy by 50% of Base Sum Insured of immediate preceding Policy Year for each successive renewal.

Out Patient (OPD) Cover



Out Patient (OPD) Cover

- ▶ Medical Expenses incurred under OPD will be covered up to ₹10,000/single adult & up to ₹20,000/family as per plan opted.



Out Patient Dental / Vision coverage

- ▶ Medical Expenses incurred under Dental / Vision OPD will be covered up to ₹5,000/ family as per plan opted.



Out Patient and Prescribed Diagnostic test for Cancer Diagnosed Patients

- ▶ Medical Expenses incurred up to the limit specified against this Benefit (if applicable) in the Policy Schedule for the Out Patient and Prescribed Diagnostic test up to ₹15,000/ policy as per plan opted



Annual Health Check-up

- ▶ The Insured Person may avail a health check-up, only for preventive purposes, up to ₹10,000 (Inception/1st renewal onwards/year) as per the plan opted.



E-Opinion (based on plan opted)

- ▶ The Insured Person may choose E-Opinion and we will facilitate E-Opinion from Our panel of Medical Practitioner under this cover.

Maternity Related Expenses Cover



Maternity Expenses (including Pre and Post Natal Check-ups)

- ▶ Medical Expenses incurred up to ₹2,00,000, including Pre-natal & Post-natal check-up and medical expenses.



New Born Baby Cover

- ▶ Medical Expenses incurred in respect of a New Born Baby whose claim under Maternity Expenses is admissible.



Child Vaccination

- ▶ Expenses up to the limits specified in Policy Schedule till the child completes 12 years of age.



AYUSH Treatment

- ▶ Medical Expenses incurred by the Insured Person for Inpatient Care under Ayurveda, Unani, Siddha and Homeopathy systems of medicines during each Policy Year.



Claims Shield

- ▶ Expenses related to Listed Non payable items related to Hospitalisation/ In-patient claims become payable under this benefit.

Optional Covers

Optional covers* can be opted by the customer as required.



Enhanced ReInsure Benefit

- Refills up to 200% of the Base Sum Insured instead of up to 100% (on complete or partial utilization of your existing Policy Sum Insured, including Enhanced Cumulative Bonus).



Enhanced Cumulative Bonus Safeguard (if claim amount is ₹1Lac or less)

- Protects the percentage of Enhanced Cumulative Bonus as specified in the Policy Schedule at subsequent renewal. This optional cover is not applicable for Platinum Infinite plan.



Wellness Benefit

- The Insured Person may avail wellness services as mentioned in the Policy Schedule. The services may include any or all as specified in the Policy Schedule:
 - Health Assistance. (A.I. Personal Fitness coaching)
 - Dietician and Nutrition E-consultation.
 - Unlimited Gym Membership.

► Walk Healthy Benefit

We will offer a discount on Renewal premium if the eligible Insured Person(s) achieves the health points target on the mobile application provided by us.

► Gym membership

- (6+6)- Eligible Customer must utilise Gym Services at least once in the first 6 months (from policy start date) to activate the next 6 months.
- (3+3+3+3) - Eligible Customer must utilise Gym Services at least once every quarter (3 month periods from policy start date) to activate the next quarter.

Optional Covers



Aggregate Deductible

- The Insured Person shall bear on his/her own account an amount equal to the opted deductible specified in the Policy Schedule for all admissible claims made by the Insured Person and assessed by the Company in a Policy Year.



Additional Basic Sum Insured for Accident

- Provides an additional double of Base Sum Insured towards Medical Expenses incurred for In-Patient Hospitalisation Treatment. This cover is applicable only for an Emergency caused solely and directly due to an Accident-causing Injury, of the Insured Person who is Hospitalised for the treatment of such Injury.



Co-payment

- 10% or 20% Co-Payment as specified in the Policy Schedule, shall be applied on each and every admissible claim after Deductible.

What Is The Waiting Period?

- 30 days initial waiting period.
- 12/24 months waiting period for specified diseases and procedures listed in policy schedule.
- 24 months waiting period on pre-existing diseases.
- 36 months waiting period on Medical Treatment abroad.
- Maternity Expenses - Single Adult - 48 months and all other family combinations - 24 months.

Lifelong Renewability With Multiple Sum Insured Options

How Can You Cover Yourself?



INDIVIDUAL



FAMILY FLOATER BASIS

In a family floater Policy, a maximum of 4 adults and any number of children can be covered.

What Are The Sum Insured Options Available?

From ₹3 Lacs to ₹2 Crores.

Other Terms & Conditions

- ◆ Free Look Period - The insured person shall be allowed free look period of thirty days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.
- ◆ Migration of Policy - The Insured will have the option to migrate the Policy to other health insurance products/plans offered by the company by applying for migration of the policy at least 30 days before the policy renewal date.
- ◆ Portability - The Insured will have the option to port the policy to other insurers by applying at least 45 days before, but not earlier than 60 days from the policy renewal date.
- ◆ Standard Exclusions –
 - Investigation and evaluation purposes
 - Obesity/Weight control
 - Cosmetic surgery
 - Hazardous/Adventure sports
 - Breach of Law
 - Alcoholism, drug or substance abuse
 - Unproven treatments
 - Sterility and infertility

Product Benefit Table

Benefits		Prime	Elite	Premier	Platinum	Platinum Infinite
Entry Age (Adult)		Min - 18 years Max - No capping	Min - 18 years Max - No capping	Min - 18 years Max - No capping	Min - 18 years Max - No capping	Min - 18 years Max - No capping
Entry Age (Child)		91 days to 30 years	91 days to 30 years	91 days to 30 years	91 days to 30 years	91 days to 30 years
Sum Insured (SI)		3 Lacs, 5 Lacs, 7 Lacs, 10 Lacs, 15 Lacs, 20 Lacs, 25 Lacs	3 Lacs, 5 Lacs, 7 Lacs, 10 Lacs, 15 Lacs, 20 Lacs, 25 Lacs	3 Lacs, 5 Lacs, 7 Lacs, 10 Lacs, 15 Lacs, 20 Lacs, 25 Lacs, 30 Lacs, 40 Lacs, 50 Lacs	10 Lacs, 15 Lacs, 20 Lacs, 25 Lacs, 30 Lacs, 40 Lacs, 50 Lacs	50 Lacs, 75 Lacs, 1 Crore and 2 Crores
Base Covers						
 Eligibility	Family Combination		Up to 4ANC	Up to 4ANC	Up to 4ANC	Up to 4ANC
	Premium Type [Zone Agnostic]		Age Banded	Age Banded	Age Banded	Age Banded
	Inpatient Hospitalization Treatment	Room Rent	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
		ICU Charges	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
	Shared accommodation Cash Benefit		500 per day, maximum INR 4000	500 per day, maximum INR 4000	500 per day, maximum INR 4000	500 per day, maximum INR 8000
	Health Multiplier		NA	For SI: 3 Lacs to 10 Lacs - 2X of SI For SI: 15 Lacs and above - 3X of SI	2X of Base Sum Insured	For SI: 10 Lacs - 2X of SI For SI: 15 Lacs and above - 3X of SI
	Pre-hospitalization Medical Expenses (up to Sum Insured)		60 Days	60 Days	60 Days	60 Days
	Post-hospitalization Medical Expenses (up to Sum Insured)		90 Days	90 Days	90 Days	180 Days
	Day Care Treatment (up to Sum Insured)		All day care covered	All day care covered	All day care covered	All day care covered
	Domiciliary Hospitalization		Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
	Home Health Care		Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
	Emergency Road Ambulance Cover (per hospitalization)		INR 3000	INR 3000	INR 4000	INR 5000
	Air Ambulance Cover (Domestic)		Up to 2 Lacs	Up to 2 Lacs	Up to 2 Lacs	Up to 10 Lacs
	Organ Donor Expenses		Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
	RelInsure Benefit (Related and Unrelated illness both)		Unlimited up to 100%	Unlimited up to 100%	Unlimited up to 100%	Unlimited up to 200%
	Bariatric Surgery Cover		Up to INR 50,000	Up to INR 50,000	Up to INR 50,000	Up to INR 2 Lacs
	Modern Treatments/ Advanced Procedures		Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
	AYUSH (In-patient hospitalization)		Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured	Actuals up to Sum Insured
	Recovery Benefit		NA	NA	INR 2500	INR 5000
	Claims Shield		Non-payable Items (paid up to Sum Insured)	Non-payable Items (paid up to Sum Insured)	Non-payable Items (paid up to Sum Insured)	Non-payable Items (paid up to Sum Insured)
 Value Added Services	E-Opinion		NA	NA	NA	4 - Per Member
	Annual Health Check-up		Up to INR 2500 (1st renewal onwards/year)	Up to INR 2500 (1st renewal onwards/year)	Up to INR 2500 (1st renewal onwards/year)	Up to INR 5000 (since inception)
 Maternity	Maternity Expenses		NA	NA	Up to INR 25,000 (N)/ INR 50,000(C-sec)	Up to 2 Lac
	New Born Baby Cover		NA	NA	Up to Maternity SI	Up to Maternity SI
	Child Vaccination (Up to 12 years of age)		NA	NA	NA	5000 per annum
 Renewal Benefits	Enhanced Cumulative Bonus (reduction is same proportion in case claim is settled)		50% of Base Sum Insured up to 100%	50% of Base Sum Insured up to 100%	50% of Base Sum Insured up to 200%	NA
	Loyalty Credit (SI enhancement irrespective of claim)		NA	NA	NA	50% of Base Sum Insured up to 100%

Product Benefit Table

 Global Cover	Medical Treatment abroad (Listed illness, Diagnosis in India)	NA	NA	NA	Actuals up to Sum Insured	Actuals up to Sum Insured
 Out Patient Cover	Out-Patient (OPD) Cover	NA	NA	NA	Single Adult – INR 5,000 All other family combinations - Up to INR 10,000/Family	Single Adult – INR 10,000 All other family combinations Up to INR 20,000/Family
	Out-Patient Dental / Vision Cover	NA	NA	NA	NA	Up to INR 5000/Family
	Out-Patient and Prescribed Diagnostic test (Cancer Diagnosed Patients)	NA	NA	INR 5000/Policy	INR 10000/Policy	INR 15000/Policy
Optional Covers						
Base Cover Modifiers	Enhanced Reinsure Benefit	Unlimited up to 200%	Unlimited up to 200%	Unlimited up to 200%	Unlimited up to 200%	NA
	Enhanced Cumulative Bonus Safeguard (if claim amount is 1Lac or less, No reduction in Enhanced Cumulative Bonus)	Covered	Covered	Covered	Covered	NA
	Co-payment	10/20%	10/20%	10%/20%	10%/20%	10%/20%
	Aggregate Deductible	1 Lac / 2 Lacs / 3Lacs	1 Lac / 2 Lacs / 3Lacs	1 Lac / 2 Lacs / 3Lacs	3 Lacs / 5 Lacs	5 Lacs/10 Lacs
	Domestic help/staff Indemnity [Room Rent - 2%, ICU - 4%, Bariatric - INR 50,000, (Day Care Treatment, AYUSH, Modern Treatment-up to Sum Insured), Emergency Road Ambulance - INR 3000/Hospitalization] [Min - 18 years/Max - 65 years]	Up to INR 50,000/1 Lac	Up to INR 50,000/1 Lac	Up to INR 50,000/1 Lac	Up to INR 50,000/1 Lac	Up to INR 50,000/1 Lac
	Additional Basic Sum Insured (for Accident related hospitalization)	2x	2x	2x	2x	2x
Wellness	Health Assistance (A.I. Personal Fitness coaching)	Covered	Covered	Covered	Covered	Covered
	Dietician and Nutrition E-consultation	Covered	Covered	Covered	Covered	Covered
	Walk Healthy Benefit (Collect health benefits by taking steps counted on our App and get discount up to 30% on renewal premium)	Covered	Covered	Covered	Covered	Covered
	Unlimited Gym Membership	Covered (3+3+3+3 option)	Covered (3+3+3+3 option)	Covered (3+3+3+3 option)	Covered (6+6 option)	Covered (6+6 option)
Waiting Period						
Waiting Period	Pre-Existing Waiting Period	2 years	2 years	2 years	2 years	2 Years
	Specific Disease waiting period	2 years	2 years	2 years	1 year	1 year
	Initial Waiting Period (Excluding Accidental Hospitalization)	30 days	30 days	30 days	30 days	30 days
	Maternity Expenses	NA	NA	Single Adult – 48 Month All other Family Combination - 24 Months	Single Adult – 48 Month All other Family Combination - 24 Months	Single Adult – 48 Month All other Family Combination - 24 Months
	Medical Treatment Abroad	NA	NA	NA	36 Months	36 Months
	Hypertension, Diabetes, Cardiac Condition	90 Days	90 Days	90 Days	90 Days	90 Days

Coverage Illustration



MR. PURI

35 years old, Married, Businessman, Delhi

Buys Super Health Elite Family Floater Insurance Policy for himself and family (Spouse and Child). Base Cover ₹ 25 lakhs, Annual Premium of ₹ 24,653 (exclusive of Taxes).

Unfortunately, his wife falls sick and has to be hospitalized in the 3rd year of the policy.
He avails of the insurance benefits as mentioned below:



HEALTH MULTIPLIER BENEFIT (HM)

His wife is diagnosed with one of the listed critical listed critical illnesses in the 3rd year of the policy. Instantly multiplies his base cover by 3x - that increases his Sum Insured by ₹50 lacs for expenses related to hospitalisation due to listed Serious illnesses

Total Coverage after trigger of Health Multiplier – ₹75 Lacs



ENHANCED CUMULATIVE BONUS (ECB)

After a year, Mr. Puri renews his Insurance Policy continuously. Fortunately, in the first and second year, there is no claim under this policy. At the end of second year, he renews his policy again. He gets ₹25 lacs as Enhanced Cumulative Bonus.

Total coverage after accrualment of ECB – ₹1 Cr.



REINSURE BENEFIT (RI)

Unlimited Reinstate Of Sum Insured for any illness. This instantly increases his base cover with additional up to ₹25 lacs.

Total Coverage after trigger of ReInsure – ₹1.25 Cr.

During the hospitalisation, Mr. Puri is eligible for:



Claim Shield

During hospitalisation, non-medical expenses that add up to 10-20% of total bill amount get covered by Claims Shield.



Pre and post hospitalisation cover

Mr. Puri and family are covered for 60 days pre and 90 days post hospitalisation, including tests, medicines and other medical expenses.



Home Health Care

The family can avail medical treatment at their home, subject to certain conditions being met.



Annual Health Check-up

Mr. Puri and his spouse can go for an annual health check up post completion of every policy year.



Hospitalisation in a network hospital under shared accommodation

Mr. Puri will get a daily cash benefit of ₹500 per day up to a maximum of ₹4000 as out of pocket expenses.



Aggregate Deductible

On availing this benefit Mr. Puri gets 20% discount on premium by opting to pay first ₹1 lac of claim in a policy year.



Pre-Existing Diseases

On completion of the Waiting Period, diseases/treatments shall be covered provided the Policy has been continuously renewed without any break. Thus, Mr. Puri's declared medical condition of Hypertension would get covered after 2 years of continuous renewal.



**Base Sum Insured
₹25,00,000**

**+ Health Multiplier
₹50,00,000**

**+ Enhanced
Cumulative Bonus
₹25,00,000**

**+ Relsure
₹25,00,000**

**= Payable
₹125,00,000**

Seamless Claim Process

What Is The Claim Procedure?

Our dedicated and experienced claims team aim to deliver you superlative customer service with a fast, fair, convenient and transparent claims process so your claim is settled without any hassle.

Our Claims Team Will:



Provide assistance in emergency situations

Keep you informed of the progress of your claim

How Do You Make A Claim?

📞 1800 210 3366 / 1800 210 6366

✉️ sbig.health@sbigeneral.in

₹ "HEALTHCLAIM" to 561612

🌐 www.sbigeneral.in

Prohibition of Rebates

Section 41 in The Insurance Act, 1938 as amended by Insurance Law (Amendment) Act, 2015:

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.



SURAKSHA AUR BHAROSA DONO

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SBI General Insurance Company Limited

Corporate & Registered Office:

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